

IN THE SMALL CLAIMS DIVISION OF THE JUSTICE'S COURT OF YELLOWSTONE COUNTY, MONTANA	<b>ORDER OF COURT AND NOTICE TO DEFENDANT</b>	CASE NO.  SM-
Court address 217 North 27th Street P.O. Box 35032 Billings, MT 59107	Court telephone no. <input type="checkbox"/> (406) 256-2897 <input type="checkbox"/> (406) 256-2899	Judge <input type="checkbox"/> Larry D. Herman <input type="checkbox"/> Pedro R. Hernandez

**PLAINTIFF(S) NAME(S)**

1(a). \_\_\_\_\_  
\_\_\_\_\_  
Address City, State, Zip Phone No

1(b). \_\_\_\_\_  
\_\_\_\_\_  
Address City, State, Zip Phone No

**VS**

**DEFENDANT(S) NAME(S)**

2(a). \_\_\_\_\_  
\_\_\_\_\_  
Address City, State, Zip Phone No

2 (b) \_\_\_\_\_  
\_\_\_\_\_  
Address City, State, Zip Phone No

**FILED**

**THE STATE OF MONTANA, TO THE ABOVE-NAMED DEFENDANT (S):**

You are directed to appear and answer the complaint at:

THE JUSTICE'S COURT, YELLOWSTONE COUNTY  
217 North 27<sup>th</sup> STREET, COURTHOUSE ROOM 603  
BILLINGS, MONTANA

ON \_\_\_\_\_ AT \_\_\_\_\_ AM/PM  
Reset for \_\_\_\_\_ AT \_\_\_\_\_ AM/PM  
Reset for \_\_\_\_\_ AT \_\_\_\_\_ AM/PM

and to have with you all books, papers, and witnesses needed by you to establish your defense to the claim. You are further notified that in case you do not appear, judgment will be taken against you by default for the relief demanded in the complaint and for costs of this action, including costs of service of the complaint and order of the court/notice to defendant. You will be required to pay court fees totaling \$15.00 upon your appearance.

**You are hereby further notified that within 10 days of service upon you of this complaint and order you may remove this action from small claims court to justice's court, and that your failure to remove constitutes a waiver of your rights to trial by jury and to representation by counsel.**

**TO THE SHERIFF, CONSTABLE OR SERVER OF PROCESS OF SAID COUNTY GREETINGS:**

2(a) Make legal service and return on the defendant \_\_\_\_\_  
at \_\_\_\_\_  
\_\_\_\_\_  
Defendant(s) Phone \_\_\_\_\_

2(b) Make legal service and return on the defendant \_\_\_\_\_  
at \_\_\_\_\_  
\_\_\_\_\_  
Defendant(s) Phone \_\_\_\_\_

Dated: \_\_\_\_\_

\_\_\_\_\_  
Justice of the Peace  
By \_\_\_\_\_  
Clerk, Small Claims Division

**PROCESS SERVER:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_